24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAGE 1 OF 6 FOR SE OF FORM 24/48	
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼	
The 2016 Committee		
	C C00569905	
Check if 24-hour report	on Mam / Dab / Yayayay	
Full Name of Payee	Date of Public Distribution/Dissemination	
ALLEGRA	04 / 13 / 2015	
Mailing Address 45668 TERMINAL DRIVE	Amount	
City State Zip Code	1370.24	
DULLES VA 20166-4390	Transaction ID : SE24.67 Date of Disbursement or Obligation	
Purpose of Expenditure FULFILLMENT ITEMS - BOOKMARKS Category/ Type 004	04 / 13 / 2015	
Name of Federal Candidate Support Office	e Sought: House District:	
DD DEN CARCON	President Senate State:	
Calendar Year-To-Date Per Election for Office Sought Disbut 209620.09	ursement For:	
Full Name of Payee	Date of Public Distribution/Dissemination	
COLORTREE GROUP, INC.	04 13 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Mailing Address 8000 VILLA PARK DRIVE	Amount	
City State Zip Code	10911.78	
RICHMOND VA 23228-6500	Transaction ID : SE24.198 Date of Disbursement or Obligation	
Purpose of Expenditure DIRECT MAIL - PRINTING Category/ Type 004	04 13 2015	
Name of Federal Candidate Support Office	e Sought: House District:	
DR. BEN CARSON Oppose	President Senate State:	
Calendar Year-To-Date Per Election for Office Sought Disbute 220531.87	ursement For:	
(a) SUBTOTAL of Itemized Independent Expenditures	12282.02	
(b) SUBTOTAL of Unitemized Independent Expenditures		
(c) TOTAL Independent Expenditures		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.		
	2 08 2015	
Signature		

: 97 A = G7 9 @ 5 B9 CI G'H9 LHF9 @ 5 H98 'HC'5 F9 DCFHZ G7 < 98 I @ 'CF' ± H9 A ± N5 H± CB

Form/Schedule: SE Transaction ID: SE24.67

The expenditures made to support this candidate were done on a nationwide basis and did not focus on any particular state or a group of states. \$26.87 has been allocated equally to each of the remaining schedule primary elections.

Form/Schedule: SE Transaction ID: SE24.198

The expenditures made to support this candidate were done on a nationwide basis and did not focus on any particular state or a group of states. \$213.96 has been allocated equally to each of the remaining schedule primary elections.

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAGE 3 OF 6 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
The 2016 Committee	C C00569905
Check if 24-hour report X 48-hour report New report Amends report filed	d on M = M / D = D / Y = Y = Y
Full Name of Payee	Date of Public Distribution/Dissemination
ECG DATA CENTER	04 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1420 SPRING HILL ROAD	Amount
SUITE 490	4454.20
City State Zip Code MCLEAN VA 22102-3028	4451.29 Transaction ID : SE24.106
	Date of Disbursement or Obligation
Purpose of Expenditure DIRECT MAIL - LIST MAINTENANCE Category/ Type 004	04 / 13 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support Office	ee Sought: House District:
DD BEN CARSON	President Senate State:
Calendar Year-To-Date Disb	pursement For: X Primary General
Per Election for Office Sought 224983.16 2016	Other (specify)
Full Name of Payee OMEGA LIST COMPANY	Date of Public Distribution/Dissemination
	04 13 2015
Mailing Address 1420 SPRING HILL	Amount
SUITE 490	,ou
City State Zip Code	4353.99
MCLEAN VA 22102-3028	Transaction ID : SE24.261 Date of Disbursement or Obligation
Purpose of Expenditure LIST RENTAL EXPENSE Category/ Type 004	04 13 / 2015
Name of Federal Candidate Support Office	ce Sought: House District:
DD BENICADSON	President Senate State:
	oursement For: X Primary General
Per Election for Office Sought 229337.15 201	6 Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	8805.28
(a) SOBTOTAL OF REHIZED INDEPENDENT EXPENDITURES	0003.20
(b) SUBTOTAL of Unitemized Independent Expenditures	1 7 1 7 1 7
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not m with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	
2 4.10	12 08 2015
Signature	

: 97 A = G7 9 @ 5 B9 CI G'H9 LHF9 @ 5 H98 'HC'5 F9 DCFHZ G7 < 98 I @ 'CF' ± H9 A ± N5 H± CB

Form/Schedule: SE

Transaction ID : SE24.106

The expenditures made to support this candidate were done on a nationwide basis and did not focus on any particular state or a group of states. \$87.28 has been allocated equally to each of the remaining schedule primary elections.

Form/Schedule: SE Transaction ID: SE24.261

The expenditures made to support this candidate were done on a nationwide basis and did not focus on any particular state or a group of states. \$85.37 has been allocated equally to each of the remaining schedule primary elections.

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAGE 5 OF 6 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
The 2016 Committee	C C00569905
Check if 24-hour report X 48-hour report New report Amends report file	ed on Man / Dab / Yayayay
Full Name of Payee RST MARKETING	Date of Public Distribution/Dissemination
Mailing Address 1272 CORPORATE PARK ROAD	04 13 2015
	Amount
City State Zip Code FOREST VA 24551-2277	61720.00 Transaction ID : SE24.230
	Date of Disbursement or Obligation
Purpose of Expenditure DIRECT MAIL - POSTAGE Category/ Type 004	04 / 13 / 2015
Name of Federal Candidate Support Office	ce Sought: House District:
DR. BEN CARSON Oppose	President Senate State:
Calendar Year-To-Date Per Election for Office Sought Dist 208249.85	oursement For: X Primary General Other (specify) Other
Full Name of Payee	Date of Public Distribution/Dissemination
	M M / D D / Y Y Y Y
Mailing Address	Amount
City State Zip Code	
	Date of Disbursement or Obligation
Purpose of Expenditure Category/ Type	M M / D D / Y Y Y Y
Name of Federal Candidate Support Offic	ce Sought: House District:
Oppose	President Senate State:
Calendar Year-To-Date Per Election for Office Sought	bursement For:
, , ,	United (Specify)
(a) SUBTOTAL of Itemized Independent Expenditures	61720.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not n with, or at the request or suggestion of, any candidate or authorized committee or agent of eith party committee) any political party committee or its agent.	
[Electronically Filed] Date	12 08 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	

: 97 A = G7 9 @ G B9 C I G H9 L H F 9 @ 5 H9 8 HC 5 F 9 D C F H Z G7 < 98 I @ C F + H9 A = N 5 H = C B

Form/Schedule: SE

Transaction ID : SE24.230

The expenditures made to support this candidate were done on a nationwide basis and did not focus on any particular state or a group of states. \$1,210.20 has been allocated equally to each of the remaining schedule primary elections.

Form/Schedule: Transaction ID: